<< Program name/program year>>

Site Performance Evaluation

Member's Name:		Today's Date:				
Placement Si	ite:					
Supervisor's	Name:					
Plea	ase rate your Placement Site in the areas listed be 5 = excellent, 4 = very good, 3 = good, 2 = g					
	Orientation to the site	5	4	3	2	1
	Orientation to the position	5	4	3	2	1
	Access to resources, learning materials, etc.	5	4	3	2	1
	Review of personal policies, organization's expectations (dress, time in & out, etc.)	5	4	3	2	1
	Performance review systems	5	4	3	2	1
	Adherence to the goals and objectives and tasks approved for your year of service	5	4	3	2	1
	Office/work space, equipment, resources to achieve your goals and objectives	5	4	3	2	1
	Site supervisor's understanding of responsibilities to the 5 Promises	5	4	3	2	1
	Overall supervision	5	4	3	2	1
	Feedback on work performed	5	4	3	2	1
	Training opportunities offered by the site	5	4	3	2	1
	Included in staff meetings and events	5	4	3	2	1
	Flexibility	5	4	3	2	1
	Opportunities to practice leadership skills	5	4	3	2	1
	Consideration of you as a professional	5	4	3	2	1

Please comment on one aspect of your placement site that was very successful or very positive.

Please comment on one aspect of your placement site that needed improvement.

Did your experience meet with your expectations?
How has your experience at this site affected your plans for your future?
Any other comments?
Thank you for your review! This information will be used to improve our program!